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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|------------------------|--|
| Attorney Docket No. | H6808.0023/P023 |
| First Inventor | Mitsugu Sato |
| Title | CHARGED PARTICLE BEAM APPARATUS AND CHARGED PARTICLE BEAM IRRADIATION METHOD |
| Express Mail Label No. | |

10/656160
09/08/03

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages **32**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets **20**]
5. Oath or Declaration [Total Sheets]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: MS Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. Paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other: **Claim for Priority**

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.:

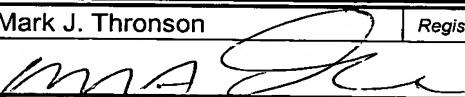
Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number: **24998** Correspondence address below

| | | | | | |
|---------|--|-----------|----------------|----------|--------------------|
| Name | DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Mark J. Thronson | | | | |
| Address | 2101 L Street NW | | | | |
| City | Washington | State | DC | Zip Code | 20037-1526 |
| Country | US | Telephone | (202) 785-9700 | | Fax (202) 887-0689 |

| | | | |
|-------------------|---|-----------------------------------|------------------------|
| Name (Print/Type) | Mark J. Thronson | Registration No. (Attorney/Agent) | 33,082 |
| Signature |  | | Date September 8, 2003 |

1515 U.S. PTO
09/08/03

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** **1,002.00**

Complete if Known

| | |
|----------------------|-----------------------|
| Application Number | Not Yet Assigned |
| Filing Date | Concurrently Herewith |
| First Named Inventor | Mitsugu Sato |
| Examiner Name | Not Yet Assigned |
| Art Unit | N/A |
| Attorney Docket No. | H6808.0023/P023 |

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

Deposit Account:

Deposit Account Number **04-1073**

Deposit Account Name **Dickstein Shapiro Morin & Oshinsky LLP**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity | Small Entity | Fee Description | Fee Paid |
|--------------|--------------|-----------------|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1051 | 130 | 2051 | 65 |
| 1052 | 50 | 2052 | 25 |
| 1053 | 130 | 1053 | 130 |
| 1812 | 2,520 | 1812 | 2,520 |
| 1804 | 920* | 1804 | 920* |
| 1805 | 1,840* | 1805 | 1,840* |
| 1251 | 110 | 2251 | 55 |
| 1252 | 410 | 2252 | 205 |
| 1253 | 930 | 2253 | 465 |
| 1254 | 1,450 | 2254 | 725 |
| 1255 | 1,970 | 2255 | 985 |
| 1401 | 320 | 2401 | 160 |
| 1402 | 320 | 2402 | 160 |
| 1403 | 280 | 2403 | 140 |
| 1451 | 1,510 | 1451 | 1,510 |
| 1452 | 110 | 2452 | 55 |
| 1453 | 1,300 | 2453 | 650 |
| 1501 | 1,300 | 2501 | 650 |
| 1502 | 470 | 2502 | 235 |
| 1503 | 630 | 2503 | 315 |
| 1460 | 130 | 1460 | 130 |
| 1807 | 50 | 1807 | 50 |
| 1806 | 180 | 1806 | 180 |
| 8021 | 40 | 8021 | 40 |
| 1809 | 750 | 2809 | 375 |
| 1810 | 750 | 2810 | 375 |
| 1801 | 750 | 2801 | 375 |
| 1802 | 900 | 1802 | 900 |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **0.00**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Extra Claims | Fee from below | Fee Paid |
|-----------------------------|----------------------|----------|
| Total Claims 14 | -20** = 0.00 | |
| Independent Claims 6 | -3** = 252.00 | |
| Multiple Dependent | | |

| Large Entity | Small Entity | Fee Description |
|--------------|--------------|--|
| Fee Code | Fee (\$) | Fee Description |
| 1202 | 18 | Claims in excess of 20 |
| 1201 | 84 | Independent claims in excess of 3 |
| 1203 | 280 | Multiple dependent claim, if not paid |
| 1204 | 84 | ** Reissue independent claims over original patent |
| 1205 | 18 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) **252.00**

** or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

(Complete if applicable)

| | | | | | |
|-------------------|---|-----------------------------------|--------|-----------|-------------------|
| Name (Print/Type) | Mark J. Thronson | Registration No. (Attorney/Agent) | 33,082 | Telephone | (202) 775-4742 |
| Signature |  | | | Date | September 8, 2003 |